Rec'd PCT/PTO 16 MAR 2005

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL020847 US

| As a below named inventor, I   | nereby declare that:   |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  | 10/528296  |  |  |  |  |  |
| My residence, post office addr   | ess and citizenship are as stat                                    | ed next to my name.  | 101760670  |  |  |  |  |  |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |  |  |  |  |  |  |  |  |
| the specification of which (che  | ck only one item below):   |  |  |  |  |  |  |  |
| is attached hereto.  |  |  |  |  |  |  |  |  |
| was filed as United States   | application  |  |  |  |  |  |  |  |
| Serial No  |  |  |  |  |  |  |  |  |
| on   |  |  |  |  |  |  |  |  |
| and was amended  |  |  |  |  |  |  |  |  |
| on   |  |  |  |  |  |  |  |  |
|  | nal application  |  |  |  |  |  |  |  |
| Number PCT/IB2003/003555   | 5  |  |  |  |  |  |  |  |
| on 08 August 2003  |  |  |  |  |  |  |  |  |
| and was amended under PCT Article 19   |  |  |  |  |  |  |  |  |
| on   |  |  | (if applicable).   |  |  |  |  |  |
| claims, as amended by any ar   |  |  | specification, including the   |  |  |  |  |  |
| Title 37, Code of Federal Reg  |  |  |  |  |  |  |  |  |
| or inventor's certificate or of a<br>States of America listed below<br>any PCT international application   | ny PCT international applicatio<br>v and have identified below any | n(s) designating at least on<br>r foreign application(s) for p<br>country other than the Uni | foreign application(s) for patent the country other than the United patent or inventor's certificate or the States of America filed by me priority is claimed: |  |  |  |  |  |
| on the same subject matter he  | g a min.g acto poloto that o                                       |  | Lawrence and a survey  |  |  |  |  |  |
| PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:  |  |  |  |  |  |  |  |  |
| COUNTRY  | APPLICATION NUMBER   | DATE OF FILIN<br>DAY, MONTH, YEA   | CLAIMED UNDER<br>35 USC 119  |  |  |  |  |  |
| The Netherlands  | 1021489  | 19 September 2002  | YES  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |

Attorneys Docket Number Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications) PHNL020847 US POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. No. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 **FULL NAME OF** FAMILY NAME SECOND GIVEN NAME FIRST GIVEN NAME **INVENTOR** NISATO Giovanni **RESIDENCE &** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY 201 CITIZENSHIP **Eindhoven** The Netherlands Italy POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY **ADDRESS** Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands FULL NAME OF SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME **INVENTOR Marcel Jose DECRE** Michel COUNTRY OF CITIZENSHIP RESIDENCE & STATE OR FOREIGN COUNTRY CITY 202 CITIZENSHIP Eindhoven<sup>1</sup> The Netherlands Belgium POST OFFICE ADDRESS POST OFFICE STATE & ZIP CODE/COUNTRY **ADDRESS** Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands FULL NAME OF SECOND GIVEN NAME **FAMILY NAME** FIRST GIVEN NAME INVENTOR **HUISMAN** Bart-Hendrik RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 203 CITIZENSHIP Eindhoven The Netherlands The Netherlands POST OFFICE POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY CITY **ADDRESS** Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands FULL NAME OF FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME INVENTOR Cornelis Paulus **BOUTEN** Petrus) RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 204 CITIZENSHIP The Netherlands The Netherlands **Eindhoven** POST OFFICE POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY CITY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

5656 AA Eindhoven

ADDRESS

15 April 2004

DAFE

Prof. Holstlaan 6

SIGNATURE OF INVENTOR 202

SIGNATURE OF INVENTOR 202

SIGNATURE OF INVENTOR 203

DATE

15 April 2004

SIGNATURE OF INVENTOR 202

DATE

15 April 2004

DATE

15 April 2004

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

The Netherlands

## **Reg'd PCT/PTO** 16 MAR 2005

10/528296

PTO/SB/90 (11-04)

Approved for use through 11/50/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO  |                  |  |   |  |                            |                              |                               |  |
|---|------------------|--|---|--|----------------------------|------------------------------|-------------------------------|--|
| I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).   |                  |  |   |  |                            |                              |                               |  |
|   | appoint:         |  |   |  |                            |                              |                               |  |
| Practitioners associated with the Customer Number:  |                  | 24738  |   | \                                      |                            |                              |                               |  |
| OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):  |                  |  |   |  |                            |                              |                               |  |
|   | Name             |  | Registration<br>Number                            |  | Name                       |                              | Registration<br>Number        |  |
| <br> -  |                  |  |   |  |                            |                              |                               |  |
| _   |                  |  |   |  |                            |                              |                               |  |
| <u> </u>  |                  |  |   |  |                            |                              |                               |  |
| <u> </u>  |                  |  |   |  |                            |                              |                               |  |
|   | 20               |  | <b>Q</b>  |  |                            |                              |                               |  |
| any and al  | i baraur abbiica | to represent the undersigned befations assigned only to the undersigned only to the undersigned ordance with 37 CFR 3.73(b). | ore the United States F<br>igned according to the | Patent and Traden<br>USPTO assignme    | nark Office<br>ent records | (USPTO) in c<br>or assignmen | onnection with<br>t documents |  |
|   |                  |  | tion identified in the att                        | ached statement                        | ender 37 C                 | ER 3 73(b) to                |                               |  |
| Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:  The address associated with Customer Number:  24738   |                  |  |   |  |                            |                              |                               |  |
|   | n or             |  |   |  | $\rightleftharpoons$       | <del></del>                  |                               |  |
| Address   | Midual Name      |  |   |  | <u> </u>                   |                              | i                             |  |
|   |                  |  |   | ·                                      |                            |                              | -                             |  |
| City  |                  | •  | State   |  |                            | Zip                          |                               |  |
| Country   |                  |  |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                            | <u> </u>                     |                               |  |
| Telephon  | e                |  |   | Fax                                    |                            |                              |                               |  |
| Assignee h  | Jame and Add     | occ'   |   | · · · · · · · · · · · · · · · · · · ·  | <del></del>                |                              |                               |  |
| Assignee Name and Address:  KONINKLIJKE PHILIPS ELECTRONICS N.V.  Groenewoudseweg 1  5621 BA Eindhoven, The Netherlands   |                  |  |   |  |                            |                              |                               |  |
| A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/86 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. |                  |  |   |  |                            |                              |                               |  |
| SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  |                  |  |   |  |                            |                              |                               |  |
| Signature   | M                | Marte. He  | iner  |  | Date (                     | 2 FEB                        | 2005                          |  |
| Name  | Michae           | l E. Marion  |   |  |                            | ne (914)                     | 333-9637                      |  |
| Title   | Author           | ized Representat   | rive  |  | <del></del>                |                              |                               |  |

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the includual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



| Applicant/Patent Owner:   | Electronics N.C.  |   |                                      |  |  |
|---|---|---|--------------------------------------|--|--|
| Application No./Patent No.:   | Concurrently  | Filed/Issue Date:                         | Concurrently                         |  |  |
| Entitled:   | A pair of substrates spaced from each other by spacers having a pre-determined pattern and method of making thereof |   |                                      |  |  |
| Koninklijke Philips Electronistates that it is:   | cs N.V., a corporatio   | <u>on</u>                                 |                                      |  |  |
| <ol> <li>the assignee of the er</li> <li>an assignee of less the the extent (by percent in the patent application/pater)</li> </ol> | an the entire right, ti<br>tage) of its ownersh   | tle and interest. ip interest is          | %                                    |  |  |
| <ul> <li>A.</li></ul>   | ent was recorded in t   | he United States Pa                       | atent and Trademark                  |  |  |
| B. A chain of title from above, to the current a  | m the inventor(s), of<br>assignee as shown t  | the patent application                    | on/patent identified                 |  |  |
|   |   |   | and Trademark Office<br>is attached. |  |  |
|   |   |   | and Trademark Office<br>is attached. |  |  |
|   |   |   | and Trademark Office<br>s attached.  |  |  |
| Additional docume   | nts in the chain of tit   | le are listed on a su                     | pplemental sheet.                    |  |  |
| Copies of assignments or [Note: A separate copy (i.i. original document) must b 37 CFR Part 3, if the assig See MPEP 302.08]        | e., the original assigners submitted to Assigners.  | nment document or<br>Inment Division in a | a true copy of the accordance with   |  |  |
| The undersigned (whose title assignee.  | is supplied below) is   | authorized to act o                       | on behalf of the                     |  |  |
| 3/6/5<br>Date   | Kevin   | Simons, Reg. No.<br>Patent Attorney       | <del>&gt;</del><br>45,110            |  |  |
|   | Tel.:   | (408) 474-9075                            |                                      |  |  |